Attorney Docket No.

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COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

| Insert Title: | FLUORESCENT | AUXILIARY | TESTING APPAR | RATUS | | | | |
|---|---|-----------|------------------|----------------|-----------------------|--|---|--|
| Insert Title: Fill in Appropriate Information - For Use Without Specification Attached: | the specification was filed onas | | | | | | as ;)l and/or as PCT and was eplicable) the claims, as de of Federal our invention nore than one than one year ed before the or my legal pplication for a prior to this | |
| | I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed: | | | | | | | |
| | Prior Foreign Application(s) | | | | Priority Claimed | | | |
| Insert Priority Information: | 92134742 | Taiwan R | O.C. | December 9 | , 2003 | \boxtimes | П | |
| (if appropriate) | (Number) | | | | /Year Filed) | Yes | No | |
| | (Number) | (Country) | | (Month/Day | //Year Filed) | ☐ Yes | □ No | |
| | (Number) | (Country) | | (Month/Day | //Year Filed) | ☐ Yes | □ No | |
| | (Number) | (Country) | | (Month/Day | //Year Filed) | ☐ Yes | □ No | |
| | I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional applications(s) listed below. | | | | | | | |
| Insert Provisional Application(s): (if any) | (Application Numb | er) | | (Filing I | Date) | | | |
| | (Application Number) | | | (Filing Date) | | | | |
| | All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application: | | | | | | | |
| | Country | | Application Numb | er | Date of Filing (Mon | th/Day/Year) | | |
| Insert Requested Information: (if appropriate) | | | | | | | | |
| | I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s) listed below and insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclosinformation which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application. | | | | | | uty to disclose | |
| Insert Prior U.S. Application(s): (if any) | (Application Numb | er) | (Filing Date) | | (Status - patented, p | status - patented, pending, abandoned) | | |

I hereby appoint the following attorneys to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the attorneys identified below, unless the inventor(s) or assignee provides said attorneys with a written notice to the contrary:

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PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

Full Name of First or Sole Inventor: Insert Name of Inventor Insert Date This Document is Signed

Insert Residence Insert Citizenship Insert Post Office Address

Full Name of Second Inventor, if any: see above

Full Name of Third Inventor, if any:

Full Name of Fourth Inventor, if any:

Full Name of Fifth Inventor, if any: I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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